.CLAIMS ONLY

Application Number	Filing Date
10 018 960	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
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21	1					
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23			1			
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25			1			
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27			1			
28			1			
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31			1			
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Total Indep						
Total Depend						
Total Claims						

CLAIMS	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						